



## UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS  
UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C. 20231  
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Bib Data Sheet

CONFIRMATION NO. 2805

<b>SERIAL NUMBER</b> 10/022,131	<b>FILING DATE</b> 12/13/2001 <b>RULE</b>	<b>CLASS</b> 285	<b>GROUP ART UNIT</b> 3627	<b>ATTORNEY DOCKET NO.</b> 11198/05201	
<b>APPLICANTS</b> Roger A. Bullivant, Burton on Trent, UNITED KINGDOM; <b>** CONTINUING DATA *****</b> <b>** FOREIGN APPLICATIONS *****</b> UNITED KINGDOM 0107598.5 08/07/2001 3-27-2001 <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> <b>** 01/16/2002</b>					
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <u>                    </u> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> UNITED KINGDOM	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 35	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> 26116					
<b>TITLE</b> Connector					
<b>FILING FEE RECEIVED</b> 505	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		



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<b>SERIAL NUMBER</b> 10/022,131	<b>FILING DATE</b> 12/13/2001 <b>RULE</b>	<b>CLASS</b> <del>285</del> 103	<b>GROUP ART UNIT</b> 3679	<b>ATTORNEY DOCKET NO.</b> 11198/05201
<b>APPLICANTS</b> Roger A. Bullivant, Burton on Trent, UNITED KINGDOM;				
** CONTINUING DATA *****				
** FOREIGN APPLICATIONS ***** UNITED KINGDOM 0107598.5 03/27/2001				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY ** ** 01/16/2002				
Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	<b>STATE OR COUNTRY</b> UNITED KINGDOM	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 35
Verified and Acknowledged	Examiner's Signature: <i>[Signature]</i> Initials: <i>[Initials]</i>			<b>INDEPENDENT CLAIMS</b> 2
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